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<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<b>Application Number</b>	09778525
	<b>Filing Date</b>	02/06/2001
	<b>First Named Inventor</b>	Douglas Ronald McCarter
	<b>Title</b>	Vice President
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	McCarter-1

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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☐ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number.

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**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	McCarter Machine Inc		
Address	1312 Underwood Road		
City	La Porte	State	TX Zip 77571
Country	USA		
Telephone	281-476-4716	Email	dmccarter@mccarteret.com

I am the:

☒ Applicant/Inventor.

**OR**

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Douglas R McCarter</i>	Date	10/05/2011
Name	Douglas R McCarter	Telephone	281-476-4716
Title and Company	Vice President, McCarter Machine Inc		

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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